| Effective October 1, 2003 /0 8/2 (87) | | | | | | | | | | | | |
|--|--|---|----------|---|------------|------------------|-----------|-----------------------|------------------------|-----------------------|----------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY | | | | | | | | | | | | |
| STAL CLAIMS | | | 10 | الما | | | | RATE | FEE | 7 7 | RATE | FEE |
| 11 | FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASIC F | | OF | | |
| ľ | TOTAL CHARGEABLE CLAIMS | | | lal minus 20= | | • | | XS 9= | + | 707 | W540 | 770.00 |
| <u> </u> | INDEPENDENT CLAIMS | | | minus 3 = | • | 1 | 1 | X43= | + | -IOR | | - |
| M | ULTIPLE DEP | ENDENT CLAIM | PRESEN | RESENT | | | | A43= | + | -JOR | X86= | 184 |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | ' | +145= | | OR | +290= | |
| | | • | | TOTAL | · L | OR | TOTAL | L | | | | |
| | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL | ENTITY | OR | OTHER SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | EA USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| 200 | Total | . 17 | Minus | -20 |) | 8 | | X\$ 9= | | OR | X\$18= | 1 |
| AME | Independent | 1. 4 | Minus | 4 | | | | X43= | | OR | X86= | / |
| <u>_</u> | FIRST PRESENTATION OF MULTIPLE DEPENDENT C | | | | CLAIM | | ! | +145= | | OR | +290= | |
| 1 | | | | | • | | L | TOTAL | | | TOTAL | |
| 3 | 16(O/O | (Column 1) | • | (Colum | | (Calumn 3) | A. | ODIT. FEE | <u> </u> | J O., <i>j</i> | NDDIT. FEE! | |
| AMENDMENT 8 | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMBI PREVIOL PAID FI | ER JSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | PATE | ADDI- TIONAL FEE |
| Ž | Total | . 15 | Minus | -20 |) | = | | X\$ 9= | | OR | X\$18= | |
| AME | Independent | <u>· 4</u> | Minus | *** . Z | | e / . | | X43≠ | : | OR | X86= | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | +290= | |
| | | | | | | | L | +145= TOTAL | • | OR L | YOTAL | |
| | | (Column 1) | AD | DIT. FEE | | On A | DDM. FEEL | ··- | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | (Column HIGHES NUMBE PREVIOUS PAID FO | R SLY | PRESENT EXTRA | T. | RATE | ADDI- TIONAL FEE | • | RATE | ADDI- TIONAL |
| | Total | • | Minus | ** | | | T, | XS 9= | | | X\$18= | _FEE |
| ME | Independent | • | Minus | ••• | | = | | X43= | | ~`` | X86= | |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | - | 145= | | OR | | |
| • 17 | If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | Ľ | +290° | · |
| | If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." if the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number to | | | | | | | | | | DIT. FEE | |
| . T | he Highest Numi | ber Previously Paid | For (To: | al or Independent) | is the h | ighest number | lound | in the app | ropriate bax | in colun | nn 1. | j |
| MM | IM PTO-875 (Rav. 1003) Petent and Tradometric Office, U.S. DEPARTMENT OF COMMERCE | | | | | | | | | | | |

Application or Docket Number